Home Health Services Review Criteria

Definitions

<u>Home Health Services</u> means a service provided an outpatient by an appropriately licensed health care professional or an appropriately qualified staff member of a licensed home care organization in accordance with orders recorded by physician, and which includes one (1) or more of the following:

- (i) Skilled nursing care including part-time or intermittent supervision;
- (ii) Physical, occupational or speech therapy;
- (iii) Medical social services;
- (iv) Home health aide services;
- (v) Medical supplies and medical appliances, other than drugs and pharmaceuticals, when provided or administered as part of, or through the provision of. Home health services, home medical equipment services, professional support services or hospice services on an outpatient basis.

Home Health Services are more specifically defined in T.C.A section 68-11-201 (17) (A).

<u>Horizon Year</u> means a one year projection period for need determinations for a new or expanded home health agency.

Geographic Service Area means a group of specific counties for which the home health agency is authorized to provide services pursuant to an existing or future certificate of need (CON). For purposes of establishing a new home health agency, the geographic service area shall consist of an individual county or any combination of contiguous counties which have an unmet need as determined through the unmet need formula or one of the exceptions. For purposes of an expansion of an existing agency, the geographic service area shall consist of an individual county or combination of counties contiguous to each other and/or to counties licensed under the agency's existing CON, which have an unmet need as determined through the unmet need formula or one of the exceptions.

Additional Capacity of Existing Agencies means the number of home health agencies licensed to provide service and the number of home health agencies with approved Certificates of Need but not yet licensed to provide service in a county X 20 patients.

<u>Unmet Need means</u> (Projected Need) - (Horizon Year Patients)

Net Unmet Need means (Unmet Need) – (Additional Capacity of Existing Agencies)

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Criteria and Standards

- 1. The need for a new or expanded home health agency shall be determined by applying a numerical need method and assessing the projected number of patients to be served by existing agencies.
 - -The numerical need for a new or expanded home health agency in any geographic service area in the horizon year shall be based on the estimated number of annual home health patients within each new or expanded county as determined by a population-based formula which is the sum of the following for each of those new/expanded counties:
 - a. Age 17 and younger ---- a *^ratio of patients per 1,000 projected horizon year civilian noninstitutional (CNI) population
 - b. Age 18 through 64 ---- a *^ratio of patients per 1,000 projected horizon year CNI population
 - c. Age 65 through 74 ---- a *^ratio of patients per 1,000 projected horizon year CNI population
 - d. Age 75 and older --- a *^ratio of patients per 1,000 projected horizon year CNI population
 - -The numerical unmet need for home health services shall be determined by subtracting the projected number of patients for ^horizon year from the projected need for services as calculated above.
 - -The projected number of patients for the ^horizon year is determined by multiplying the ^number of patients having received services in each county as reported in the latest joint annual reports (JAR), by the county population ^change factor.
 - -The county population ^change factor is the percent change in total population between the ^latest JAR year and the ^horizon year.

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- 2. Home health CON applicants have met the criteria if there is a ^net unmet need for a given geographic service area.
- 3. An exception to the needs methodology may be allowed if the applicant of a new or expanded home health agency can show that there is limited access in a proposed geographic service area for special groups such as, but not limited to, medically fragile children, newborns and their mothers, and HIV/AIDS patients
- 4. Additional documentation shall include the following:
 - a. The applicant shall provide letters of intent from physicians and other referral sources pertaining to patient referral located in each county of the proposed service area.
 - b. The applicant shall provide information indicating the types of cases physicians would refer to the proposed home health agency and the projected number of cases by service category to be provided in the initial year of operation.
 - c. The applicant shall provide letters from potential patients or providers in the proposed service area that state they have attempted to find appropriate home health services but have not been able to secure such services.
 - d. The applicant shall provide information concerning whether a proposed agency would provide services different from those services offered by existing agencies.

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^{*}Ratio is based on actual state of TN use rates blended from last two years available JAR data and census/population projections.

[^] Updated Annually